Whereas, Cervical cancer screening is indicated for female-to-male transgender patients who have a cervix and are sexually active, according to general cervical screening guidelines;¹ and

Whereas, Routine cervical screening has been shown to greatly reduce both the incidence of new cervical cancers diagnosed each year and deaths from the disease;²,³,⁴ and

Whereas, Some health care providers employ a misconception that female-to-male transgender patients have a lower risk of cervical cancer;⁵ and

Whereas, A recent survey of obstetricians and gynecologists found that only 29% were comfortable caring for female-to-male transgender patients;⁶ and

Whereas, Female-to-male transgender patients are significantly less likely to be up to date on Pap smears than cisgender women;⁷ and

Whereas, Female-to-male transgender patients face barriers to adequate cervical cancer screening, including lack of access to safe and inclusive health care providers and lack of education on the importance of continuing to receive Pap smears as compared to cisgender patients facing cervical cancer screenings;⁸,⁹,¹⁰,¹¹ and

Whereas, Even when receiving Pap smears, female-to-male transgender patients are significantly more likely to have longer periods to test follow up from ambiguous lab results than non-transgender patients,³ therefore be it

RESOLVED, That our American Medical Association amend Policy H-160.991[2] by addition to read as follows:

Health Care Needs of Lesbian Gay Bisexual and Transgender Populations H-160.991

2. Our AMA will collaborate with our partner organizations to educate physicians regarding:
   (i) the need for women who have sex with women and female-to-male transgender patients when medically indicated to undergo regular cancer and sexually transmitted infection screenings due to their comparable or elevated risk for these conditions; and (ii) the need for comprehensive screening for sexually transmitted diseases in men who have sex with men; and (iii) appropriate safe sex techniques to avoid the risk for sexually transmitted diseases.

(Modify Current HOD Policy)

Fiscal Note: Not yet determined

Received: 09/12/17

RELEVANT AMA POLICY

Health Care Needs of Lesbian Gay Bisexual and Transgender Populations H-160.991

1. Our AMA: (a) believes that the physician's nonjudgmental recognition of patients' sexual orientations, sexual behaviors, and gender identities enhances the ability to render optimal patient care in health as well as in illness. In the case of lesbian gay bisexual and transgender (LGBT) patients, this recognition is especially important to address the specific health care needs of people who are or may be LGBT; (b) is committed to taking a leadership role in: (i) educating physicians on the current state of research in and knowledge of LGBT Health and the need to elicit relevant gender and sexuality information from our patients; these efforts should start in medical school, but must also be a part of continuing medical education; (ii) educating physicians to recognize the physical and psychological needs of LGBT patients; (iii) encouraging the development of educational programs in LGBT Health; (iv) encouraging physicians to seek out local or national experts in the health care needs of LGBT people so that all physicians will achieve a better understanding of the medical needs of these populations; and (v) working with LGBT communities to offer physicians the opportunity to better understand the medical needs of LGBT patients; and (c) opposes, the use of "reparative" or "conversion" therapy for sexual orientation or gender identity.

2. Our AMA will collaborate with our partner organizations to educate physicians regarding: (i) the need for women who have sex with women to undergo regular cancer and sexually transmitted infection screenings due to their comparable or elevated risk for these conditions; and (ii) the need for comprehensive screening for sexually transmitted diseases in men who have sex with men; and (iii) appropriate safe sex techniques to avoid the risk for sexually transmitted diseases.

3. Our AMA will continue to work alongside our partner organizations, including GLMA, to increase physician competency on LGBT health issues.

4. Our AMA will continue to explore opportunities to collaborate with other organizations, focusing on issues of mutual concern in order to provide the most comprehensive and up-to-date education and information to enable the provision of high quality and culturally competent care to LGBT people.


See also: HPV Vaccine and Cervical Cancer Prevention Worldwide H-440.872